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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		<b>Attorney Docket No.</b> 1017.P021USC7	
		<b>First Named Inventor or Application Identifier</b>	<b>Thomas E. Drake, Jr.</b>
		<b>Title</b>	<b>METHOD AND APPARATUS FOR DETECTING ULTRASONIC SURFACE DISPLACEMENTS USING POST-COLLECTION OPTICAL AMPLIFICATION</b>
		<b>Express Mail Label No.</b>	<b>EU 571 365 325 US</b>

<b>APPLICATION ELEMENTS</b> <i>See MPEP Chapter 600 concerning utility patent application contents</i>	<b>ADDRESS TO:</b> Mail Stop: Patent Applications Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages] <b>31</b> <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] <b>4</b> 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages] <b>5</b> <i>(including Supplemental Declaration)</i> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, See 37 CFR §1.63(d)(2) and 1.33(b) 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies. <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & Documents(s)) 10. <input type="checkbox"/> 37 CFR §3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/ PTO-Form 1449 <input type="checkbox"/> Copies of IDS Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 USC 122(b)(2)(b)(i). Applicant must attach Form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____
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**18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76::**

☒ Continuation    
 ☐ Divisional    
 ☐ Continuation-in-part (CIP)    
 of prior application No: 09/416,399

**Prior application information:** Examiner: Natividad, Philip Sana    
 Group / Art Unit: 2877

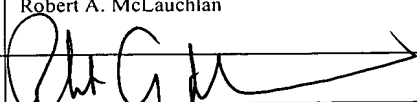
*For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.*

**19. CORRESPONDENCE ADDRESS**

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 or ☒ Correspondence address below

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Signature		Date	September 22, 2003

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03916 U.S. PTO  
10/668896

09/23/03  
18351  
U.S. Patent

# **FEE TRANSMITTAL FOR FY 2003**

Patent Fees are subject to annual revision.

☒ Applicant claims small entity status.  
See 37 CFR 1.27

Application Number	Unknown
Filing Date	Herewith
First Named Inventor	Thomas E. Drake, Jr.
Examiner Name	Natividad, Philip Sana
Group / Art Unit	2877
Attorney Docket No.	1017.P021USC7

**Total Amount of Payment**    **\$ 750.00**

## **METHOD OF PAYMENT (check all that apply)**

☐ Check    ☒ Credit Card    ☐ Money Order    ☐ Other    ☐ None

☒ Deposit Account:

Deposit Account No.: 50-2240

Deposit Account Name: Koestner Bertaini, LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge any fee(s) indicated below    ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below (except for the filing date) to the above identified deposit account.

## **FEE CALCULATION**

### **1. Basic Filing Fee**

Large Entity		Small Entity		Fee Description	Fee Paid
FeeCode	Fee(\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility Filing Fee	\$ 750.00
1002	330	2002	165	Design Filing Fee	\$
1003	520	2003	260	Plant Filing Fee	\$
1004	750	2004	375	Reissue Filing Fee	\$
1005	160	2005	80	Provisional Filing Fee	\$
<b>Subtotal (1)</b>					<b>\$ 750.00</b>

### **2. Extra Claim Fees**

Claims	Extra	Fee (below)	Fee Paid
Total    - 20 =	x	\$ 9.00	=
Indep.    - 3 =	x	\$ 42.00	=
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
<b>Subtotal (2)</b>				<b>\$</b>

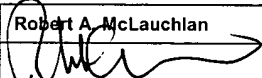
\*\*or number previously paid, if greater. For Reissues, see below

## **FEE CALCULATION (continued)**

### **3. Additional Fees**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late fee or oath	\$
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	\$
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	Request for Reexamination	\$
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	\$
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	\$
1251	110	2251	55	Extension for reply within first month	\$
1252	400	2252	200	Extension for reply within second month	\$
1253	920	2253	460	Extension for reply within third month	\$
1254	1,440	2254	720	Extension for reply within fourth month	\$
1255	1,960	2255	980	Extension for reply within fifth month	\$
1401	320	2401	160	Notice of Appeal	\$
1402	320	2402	160	Filing a brief in support of an appeal	\$
1403	280	2403	140	Request for oral hearing	\$
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	\$
1453	1,280	2453	640	Petition to revive - unintentional	\$
1501	1,280	2501	640	Utility issue fee (or reissue)	\$
1502	460	2502	230	Design issue fee	\$
1460	130	1460	130	Petitions to the Commissioner unless otherwise specified	\$
1807	50	1807	50	Statutory Disclaimer	\$
1806	180	1806	180	Submission of Information Disclosure Statement	\$
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	\$
1809	740	2809	370	Filing a submission after final rejection (37 CFR 1.129(a))	\$
1810	740	2810	370	For each additional invention to be examined (37 CFR 1.129(b))	\$
1801	740	2801	370	Request for Continued Examination (RCE)	\$
1802	900	1802	900	Request for expedited examination of a design application	\$
Other fee (specify):					\$
* Reduced by Basic Filing Fee Paid					
<b>Subtotal (3)</b>					<b>\$</b>

## **SUBMITTED BY**

Name (Print/Type)	Registration No.	Telephone	Complete (if applicable)
Robert A. McLaughlan	44,924		(512) 339-4100
Signature	Date		
	September 22, 2003		